NEVADA REGISTER OF HISTORIC PLACES

REGISTRATION FORM

1. NAME OF PROPERTY			
Historic name			
Other names			
2. LOCATION			
Street and Number			
City or Town			
Assessor=s Parcel Number moved_	Origina	al Location?Ye	esNo. If no, date
3. CLASSIFICATION			
Ownership of Property	Category of Property	Number of Re	esources within Property
private public-local public-state 4. CERTIFICATION a. BOARD OF MUSEUMS AND	building(s) district site structure object	contributing	non-contributing buildings sites structures objects total
As the chair of the Nevada Mu documentation standards for lie			nomination meets the
Signature of	the Chair		Date
B. STATE HISTORIC PRESE	RVATION OFFICE		
As the Nevada State Historic F documentation standards for li			ination meets the
Signature of the State Hi	storic Preservation Officer		Date
		Property Name:	

5. FUNCTION OR USE		
Historic Function		Current Function
6. ELIGIBILITY CRITERIA	(select one or mo	ore from instructions)
Criterion A	Criterion B	Criterion C Criterion D
7. DESCRIPTION (select i material)	nformation that bes	st describes exterior fabric, structural system, and roofing
Architectural Style (if applica	able)	Materials
	•	Foundation
		walls
		roof
		other
On the continuation sheet, pro appearance (include significant		escription of the property=s present and historical physical prior features.
appearance (moduce organical		
8. STATEMENT OF SIGN	IFICANCE	
Areas of Significance		Period of Significance (dates)
		Cultural Affiliation
Significant Person		Architect/Builder

On the continuation sheet, state the property=s historical significance and justification for listing.

9. MAJOR BIBLIOGRAPHICAL REFEREN	CES (include all sources o	f information)	
(Use continuation sheet, if necessary)	(,	
10. GEOGRAPHICAL DATA			
Acreage of Property			
Verbal Boundary Description			
Boundary Justification			
11. FORM PREPARED BY			
Name/Title			_
Organization			_
Address			
City or Town		Zip	
Telephone Number			

Property Name: _____

12. A	DDITIONAL REQUIREMENTS
Includ	e the following items with your submission:
	Photographs/Sketch (provide one or more black-and-white photograph or sketch of the front elevation of the building, minimum size to be 5 inches by 7 inches. Multiple photographs showing additional angles and views would be preferable. Include the name of the photographer, date of photograph and direction the camera was facing).
	Plan (provide a line drawing of the floor plan of the building, if possible).
	Map (provide a USGS 7.5-minute quadrangle or current city street map with the property marked on it in pencil).
	Continuation Sheets (include continuation sheets, as needed, indicating appropriate section numbers).

Property Name: _____

Property Name:	
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CONTINUATION SHEET

Section 7: Description

Property Name: _	
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CONTINUATION SHEET

Section 8. Significance (attach more sheets as necessary)

STATE HISTORIC PRESERVATION OFFICE

Department of Cultural Affairs 100 N. Stewart Street Carson City, NV 89701

NEVADA STATE REGISTER OF HISTORIC PLACES OWNER AGREEMENT FORM

NAME OF PROPERTY:	
LOCATION OF PROPERTY:	
OWNER OF RECORD:	
ADDRESS:	
the proposed nomination of the above-ref	he Nevada State Historic Preservation Office regarding ferenced property to the State Register of Historic rty, I agree, disagree with the placement of ic Places.
Date	Owner's Signature
Please return this form to the State Historic	Preservation Office.

Terri McBride State Historic Preservation Office 100 N. Stewart Street Carson City, NV 89701

775-684-3445